



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

FLAGSTAFF FAMILY YMCA 2019-20 AFTER ADVENTURE

This program is not licensed by the State of Arizona and operates under Arizona Revised Statute 36-884.6

Child's name _____ Birth date _____ Grade _____ Age _____
 Parent's name _____ Birth date _____ (Required for registration)
 Address _____ City _____ AZ Zip code _____
 Primary Phone (C) or (H) _____ Work _____
 Parent's E-mail address _____ (Required for registration)

MY CHILD'S FIRST DATE OF TRANSPORTATION: _____	Draft on the 1ST of every month <small>(check plan you are registering for and circle rater)</small>	
AFTER SCHOOL PLAN	MEMBER	NON-MEMBER
After school transportation & program to the Flagstaff Family YMCA for Y Programs. Includes early release days. <i>Please select your child's school:</i> <input type="checkbox"/> San Francisco de Asis <input type="checkbox"/> Basis <input type="checkbox"/> Thomas Elem <input type="checkbox"/> Puente <input type="checkbox"/> Pine Forest	\$ 185	\$260

YMCA PROGRAMS ARE AVAILABLE ON OUT-OF-SCHOOL DAYS AT AN ADDITIONAL COST, PLEASE SEE FRONT DESK FOR DETAILS

DUE AT TIME OF REGISTRATION:

\$35 or 0	Child Care Registration Fee/per child or waived with Family Membership	For office use only
\$	First month childcare payment (if registration not received 10 days prior to the 1 st)	Starfund #
Total due today: _____	Paid by: <input type="checkbox"/> Check # _____ <input type="checkbox"/> CASH <input type="checkbox"/> CREDIT CARD	Date _____ Staff Initials _____
Draft Begins on: / 01 /		Comments:

SESSION BILLING IS BASED ON THE FULL SCHOOL YEAR PRICE AND THEN DIVIDED INTO 10 EQUAL PAYMENTS. EACH MONTH YOU PAY 1/10TH OF YOUR TOTAL BILL, REGARDLESS OF THE NUMBER OF SCHOOL DAYS ACTUALLY OCCURRING IN THAT MONTH. THIS INCLUDES MONTHS THAT CONTAIN INTERSESSIONS & SCHOOL BREAKS. THE Y DOES NOT GIVE CREDITS FOR ILLNESSES, HOLIDAYS OR FAMILY VACATIONS TAKEN DURING SCHOOL DAYS. ALL PLANS USE THE ATS BANK DRAFT (CREDIT/DEBIT CARD) SYSTEM AND ARE WITHDRAWN ON THE 1ST OF EACH MONTH. REGISTRATIONS MUST BE RECEIVED 10 DAYS PRIOR TO THE 1ST TO BE INCLUDED ON THE DRAFT OR PRE-PAYMENT IN FULL FOR THAT MONTH IS REQUIRED.

IF YOUR FINANCIAL INSTITUTION FOR ANY REASON RETURNS YOUR PAYMENT, THE ITEMS WILL BE RE-PRESENTED ELECTRONICALLY AND YOU WILL BE CHARGED A \$25 PROCESSING FEE. IF YOU ARE LATE IN PICKING UP YOUR CHILD (REN) A DOLLAR PER MINUTE LATE FEE WILL BE APPLIED TO YOUR ACCOUNT. YOU MAY DISENROLL WITH A 30 DAY PRIOR WRITTEN NOTICE. THIS NOTICE MUST BE TURNED INTO THE YMCA.

DUE DATES/BANK DRAFT DATES: 8/1 9/1 10/1 11/1 12/1 1/1 2/1 3/1 4/1 5/1

I have read, understand, and agree to adhere to the YMCA child care program Statement of Services, payment policies, and give the YMCA permission to use photographs of my child, in a group setting, for YMCA promotional materials.

MY SIGNATURE ACKNOWLEDGES MY UNDERSTANDING AND AGREEMENT TO THE ABOVE.

Parent/Guardian's Signature Date

Financial Assistance is available upon request. You must fill out, attach a Financial Assistance form, and provide proof of income.